							5/03/21 10:58
Fill	n this info	ormation to identify your case	e and this filir	ng:			
Deb	tor 1	Aaron Hickmon					
Deh	tor 2	First Name	Middle Name	Last Name			
	ise, if filing)	First Name	Middle Name	Last Name			
Unit	ed States E	Bankruptcy Court for the: EA	STERN DIST	RICT OF MICHIGAN - EDMI			
Cas	e number	21-30628				I	☐ Check if this is an amended filing
Sc	hedu	orm 106A/B Ile A/B: Proper		et only once. If an asset fits in more than one			12/15
nfori	nation. If m er every qu	ore space is needed, attach a se estion.	parate sheet to	o married people are filing together, both are this form. On the top of any additional pages al Estate You Own or Have an Interest In			
	_	to to Part 2. Where is the property?					
1.1	4000 D-		Wha	at is the property? Check all that apply			
	1306 Do	ss, if available, or other description	© C	Condominium or cooperative	the amount	of any secured	ms or exemptions. Put claims on Schedule D: s Secured by Property.
	Flint	MI 48532-		- -	Current val	erty?	Current value of the portion you own?
	City	State ZIP C	ode <u>L</u>	Investment property Timeshare	\$12	0,000.00	\$120,000.0
			E Who	_	(such as fe a life estate	e simple, tena), if known.	ur ownership interest ncy by the entireties, o
				Debtor 1 only	fee owne	r	
	County	•		Debtor 2 only			
	County			At least one of the debtors and another	(see inst	ructions)	nunity property
				er information you wish to add about this iter perty identification number:	ii, such as 100	al	
2.	Add the do	ollar value of the portion you	own for all of	f your entries from Part 1, including any	entries for		\$120,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 A	aron Hickmon		Case number (if known)	21-30628
3. Cars, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles		
□No				
Yes				
3.1 Make:	Chevy	Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
Model:	Impala	■ Debtor 1 only		ve Claims Secured by Property.
Year:	2014	Debtor 2 only	Current value of	
Approxim Other info	ate mileage: 170,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
Outor time	ATTICULOTI.	At least one of the deptors and another		
		☐ Check if this is community property (see instructions)	\$3,000	0.00 \$3,000.00
		(See IIISHUCHONS)		
		nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
		wn for all of your entries from Part 2, includin that number here		\$3,000.00
Part 3: Describ	e Your Personal and Household I	tems		
·	, , ,	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	goods and furnishings Major appliances, furniture, linen: cribe	s, china, kitchenware		
	misc. househo	ld goods and furnishings		\$3,500.00
	ncluding cell phones, cameras, i	deo, stereo, and digital equipment; computers, pi media players, games	rinters, scanners; music c	ollections; electronic devices
	misc. electroni	cs		\$100.00
	antiques and figurines; paintings ther collections, memorabilia, co	, prints, or other artwork; books, pictures, or othe ollectibles	er art objects; stamp, coin	or baseball card collections;
	misc. knicknad	ks, books, and pictures		\$200.00
Examples: S	nusical instruments	and other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;

Debtor 1	Aaron Hickm	ion			Case number (if know	n) 21-30628	
10. Firearm							
■ No	les: Pistols, rifles	, shotgur	ns, ammunition, a	nd related equipment			
11. Clothes	.						
□ No		thes, fur	s, leather coats, d	lesigner wear, shoes, accesso	ories		
■ Yes.	Describe	misc.	personal cloth	ina		\$	500.00
				9			
□ No	les: Everyday jev	velry, cos	stume jewelry, enç	gagement rings, wedding ring	s, heirloom jewelry, watches, gems	s, gold, silver	
■ Yes.	Describe	misc.	jewelry			\$	3100.00
			, , , , , , , , , , , , , , , , , , , ,			<u> </u>	
13. Non-far Examp ■ No	m animals les: Dogs, cats, b	oirds, hor	ses				
☐ Yes.	Describe						
-	ner personal and	d housel	nold items you d	id not already list, including	g any health aids you did not list		
■ No □ Yes.	Give specific info	ormation.					
				n Part 3, including any entrie	es for pages you have attached	\$4,400	0.00
Part 4: Dos	scribe Your Financ	nial Assat	•				
				in any of the following?		Current value of portion you owr Do not deduct se claims or exempt	n? ecured
16. Cash	les: Money you h	nave in v	our wallet in vour	home in a safe denosit hox	and on hand when you file your pe		.10113.
■ No				nome, in a sale deposit sex,	and off hand when you like your pe		
Examp				ccounts; certificates of deposints with the same institution, I	t; shares in credit unions, brokerag ist each.	e houses, and other simil	lar
□ No ■ Yes				Institution name:			
		17.1.	checking	DFCU		\$	250.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Aaron Hickmon	Case number (if known) 21-30628
Exam _l	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with	
■ No □ Yes.	Institution or issu	er name:
	ublicly traded stock and interests in incoventure	rporated and unincorporated businesses, including an interest in an LLC, partnership, and
	Give specific information about them Name of entity:	
Negot	tiable instruments include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.
☐ Yes.	Give specific information about them Issuer name:	
<i>Exam</i> _l □ No	List each account separately.), 403(b), thrift savings accounts, or other pension or profit-sharing plans
	Type of account: PSP	Institution name: work provided \$1,500.00
Your s Exam _i ■ No		e so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual:
23. Annui t ■ No □ Yes.		oney to you, either for life or for a number of years)
26 U.S. ■ No	.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition program. tion. Separately file the records of any interests.11 U.S.C. § 521(c):
■ No	Give specific information about them	r (other than anything listed in line 1), and rights or powers exercisable for your benefit
Exam _i ■ No	ts, copyrights, trademarks, trade secrets, ples: Internet domain names, websites, prod	, and other intellectual property beeds from royalties and licensing agreements

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Aaron Hickmon		Case number (if known)	21-30628
7. Licens Examp ■ No	es, franchises, and other generables: Building permits, exclusive lic	al intangibles enses, cooperative association holdings, liquor licen	ses, professional licenso	es
	Give specific information about th	em		
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	funds owed to you Give specific information about the	em, including whether you already filed the returns ar	nd the tax years	
		2021 tax refund	Federal and Sta	te \$500.00
		2021 tax 101ana	T cuciai and old	
■ No		y, spousal support, child support, maintenance, divo	rce settlement, property	settlement
Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insu benefits; unpaid loans you m Give specific information	rance payments, disability benefits, sick pay, vacationade to someone else		nsation, Social Security
	<u> </u>		<u> </u>	
Examp ■ No	ots in insurance policies oles: Health, disability, or life insura Name the insurance company of e Company n			Surrender or refund value:
If you a someo	terest in property that is due you are the beneficiary of a living trust, one has died. Give specific information	a from someone who has died expect proceeds from a life insurance policy, or are	currently entitled to rece	eive property because
	<u></u>			
Examp ■ No		or not you have filed a lawsuit or made a demand tes, insurance claims, or rights to sue	for payment	

Official Form 106A/B

Debtor 1	Aaron Hickm	non			Case number (if known)	21-30628
34. Other (contingent and u	ınliquidated	claims of every nature,	including counterclaims	of the debtor and rights to	set off claims
■ No						
☐ Yes.	Describe each cl	laim				
25 Any fin	nancial assets yo	ou did not als	roody list			
SS. Ally IIII ■ No	ianciai assets yo	ou did fiot all	eauy iist			
☐ Yes.	Give specific info	ormation				
	•					
				luding any entries for pa		\$2,250.00
Part 5: De	scribe Any Busines	ss-Related Pro	operty You Own or Have a	n Interest In. List any real est	tate in Part 1.	
			le interest in any business			
No. Go	to Part 6.					
☐ Yes. G	So to line 38.					
						Current value of the
						portion you own? Do not deduct secured claims or exemptions.
38. Accou	nts receivable or	r commissio	ns you already earned			
□ No	Describe					
□ res.	Describe					
39. Office	equipment, furni	shings, and	supplies			
Examp	oles: Business-rela	ated compute	ers, software, modems, p	rinters, copiers, fax machin	nes, rugs, telephones, desks	, chairs, electronic devices
□ No						
☐ Yes.	Describe					
40. Machi r	nery, fixtures, eq	uipment, su	oplies you use in busin	ess, and tools of your tra	ıde	
□ No □ Yes	Describe					
— 100.	Decoribe					
41. Invent	ory					
□ No						
☐ Yes.	Describe					
42. Interes	sts in partnership	os or joint ve	entures			
	•	· -				
□ No	Give enecific info	armatian ab	it thom			
⊔ Yes.	Give specific into	ormation abou Name o	ut themf entity:		% of ownership:	
					. %	

Official Form 106A/B Schedule A/B: Property

page 6

Debtor 1	Aaron Hickm	non	Case number (if known)	21-30628
43. Custo	omer lists, mailing	g lists, or other compilations		
□ Do y	our lists include per	sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□No			
	☐ Yes. Describe	h		
44. Any k	ousiness-related p	property you did not already list		
□No				
⊔ Yes	s. Give specific info	rmation		
		of all of your entries from Part 5, including any entries for pages number here		
		and Commercial Fishing-Related Property You Own or Have an Interest In interest in farmland, list it in Part 1.		
	ou own or have ar	ny legal or equitable interest in any farm- or commercial fishing-r	elated property?	
☐ Ye	es. Go to line 47.			Current value of the
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm Exan		oultry, farm-raised fish		
□ No □ Yes	S			
48. Crop :	s—either growing	or harvested		
□ No				
	s. Give specific info			
49. Farm	and fishing equip	oment, implements, machinery, fixtures, and tools of trade		
□ No				
☐ Yes	S			
50. Farm	and fishing supp	lies, chemicals, and feed		
□ No				
⊔ Yes	S			
F4	<u> </u>			
_	arm- and comme	cial fishing-related property you did not already list		
□ No □ Yes	s. Give specific info	ormation		
Official Fo	orm 106A/B	Schedule A/B: Property		page 7

\$129,650.00

Debt	or 1	Aaron Hickn	non		Case number (if known)	21-30628
52.			of all of your entries from Part 6, incl number here			
Part	7:	Describe All Pro	perty You Own or Have an Interest in Tha	t You Did Not List Above		
	-	•	perty of any kind you did not already ets, country club membership	list?		
	No					
	Yes. G	Give specific info	ormation			
54.	Add th	ne dollar value	of all of your entries from Part 7. Writ	te that number here		\$0.00
Part	8: I	List the Totals of	Each Part of this Form			
55.	Part 1:	: Total real esta	nte, line 2			\$120,000.00
56.	Part 2:	Total vehicles	, line 5	\$3,000.00		
57.	Part 3:	: Total persona	l and household items, line 15	\$4,400.00		
58.	Part 4:	Total financia	l assets, line 36	\$2,250.00		
			s-related property, line 45	\$0.00		
			d fishing-related property, line 52	\$0.00		
61.	Part 7:	: Total other pr	operty not listed, line 54	+\$0.00		
62.	Total p	personal prope	rty. Add lines 56 through 61	\$9,650.00	Copy personal property to	stal \$9,650.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Fill in this infor	mation to identify your	case:		
Debtor 1	Aaron Hickmon			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN - EDMI	
	21-30628			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

-a	identity the Property You Claim as E	xempt				
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if your spouse is filing v	vith you.		
	☐ You are claiming state and federal nonbank	are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 U	ou are claiming federal exemptions. 11 U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	mpt, fill in the informat	ion below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemptio	n you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for ea	ach exemption.		
	1306 Donal Dr. Flint, MI 48532	\$120,000.00		\$25,150.00	11 U.S.C. § 522(d)(1)	

	Schedule A/B			
1306 Donal Dr. Flint, MI 48532 Genesee County	\$120,000.00		\$25,150.00	11 U.S.C. § 522(d)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
misc. household goods and furnishings	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
misc. electronics Line from Schedule A/B: 7.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Ellio II oli Govedale 77 E. TT			100% of fair market value, up to any applicable statutory limit	
misc. knicknacks, books, and pictures	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
misc. personal clothing	\$500.00	•	\$500.00	11 U.S.C. § 522(d)(3)
Line from Gonedate AVD. TTT			100% of fair market value, up to any applicable statutory limit	

Aaron Hickmon			Case number (if known)	21-30628
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	The state of the s		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
misc. jewelry Line from Schedule A/R: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
Zino nom concedito //2. Par			100% of fair market value, up to any applicable statutory limit	
checking: DFCU	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
Line Hotti Scredule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
PSP: work provided	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(12)
Line Hotti Scredule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	
Federal and State: 2021 tax refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
Line Holli Galledale PAB. 20.1			100% of fair market value, up to any applicable statutory limit	
(Subject to adjustment on 4/01/22 and every	. ,		led on or after the date of adjustmer	ıt.)
	- d b - d	91. 1	OAE days hafaya yay filaddhia aa af	
	ea by the exemption wi	unin 1	,215 days before you filed this case	r
	Brief description of the property and line on Schedule A/B that lists this property misc. jewelry Line from Schedule A/B: 12.1 checking: DFCU Line from Schedule A/B: 17.1 PSP: work provided Line from Schedule A/B: 21.1 Federal and State: 2021 tax refund Line from Schedule A/B: 28.1 Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No	Brief description of the property and line on Schedule A/B that lists this property misc. jewelry Line from Schedule A/B: 12.1 Checking: DFCU Line from Schedule A/B: 17.1 PSP: work provided Line from Schedule A/B: 21.1 Federal and State: 2021 tax refund Line from Schedule A/B: 28.1 Are you claiming a homestead exemption of more than \$170,35 (Subject to adjustment on 4/01/22 and every 3 years after that for call No Yes. Did you acquire the property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the schedule A/B is a property covered by the exemption with the property covered by the exemption of the property cov	Brief description of the property and line on Schedule A/B that lists this property Misc. jewelry Line from Schedule A/B: 12.1 Checking: DFCU Line from Schedule A/B: 17.1 Checking: DFCU Line from Schedule A/B: 21.1 PSP: work provided Line from Schedule A/B: 21.1 Federal and State: 2021 tax refund Line from Schedule A/B: 28.1 Federal and State: 2021 tax refund Line from Schedule A/B: 28.1 Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases file No Yes. Did you acquire the property covered by the exemption within 1 No	Brief description of the property and line on Schedule A/B that lists this property Current value of the protion you own Copy the value from Schedule A/B that lists this property Check only one box for each exemption.

Fill in this information to identify	your case:			
Debtor 1 Aaron Hickm	on			
First Name	Middle Name Last Nar	me	-	
Debtor 2			_	
(Spouse if, filing) First Name	Middle Name Last Nar	me		
United States Bankruptcy Court for t	he: EASTERN DISTRICT OF MICHIGAN -	EDMI	_	
Case number 21-30628				
(if known)			☐ Check	if this is an
			ameno	led filing
000 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			·	
Official Form 106D				
Schedule D: Credito	rs Who Have Claims Secu	red by Propert	У	12/15
	le. If two married people are filing together, both a lit out, number the entries, and attach it to this fo			
1. Do any creditors have claims secure	d by your property?			
\square No. Check this box and subm	it this form to the court with your other schedule	es. You have nothing else	to report on this form.	
Yes. Fill in all of the informati	on below.			
Part 1: List All Secured Claims				
	as more than one secured claim, list the creditor sepa	Column A	Column B	Column C
for each claim. If more than one creditor	has a particular claim, list the other creditors in Part 2	. As Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alpha	betical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Caliber Home Loans	Describe the property that secures the claim	\$139,000.00	\$120,000.00	\$32,990.00
Creditor's Name	1306 Donal Dr. Flint, MI 48532 Genesee County			
715 S. Metropolitan	As of the date you file, the claim is: Check all the	nat		
Oklahoma City, OK 73108	apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	\square An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)		
At least one of the debtors and another		_		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	lortgage		
Date debt was incurred	Last 4 digits of account number			
2.2 Caliber Home Loans	Describe the property that secures the claim	\$13,990.00	\$120,000.00	\$0.00
Creditor's Name	1306 Donal Dr. Flint, MI 48532		<u> </u>	Ψ0.00
	Genesee County			
	As of the date you file, the claim is: Check all the	nat .		
715 S. Metropolitan	apply.	icit		
Oklahoma City, OK 73108	_ Gontingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)		
☐ At least one of the debtors and another		,		
☐ Check if this claim relates to a community debt		d Mortgage		
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Aaron Hickmon Case number (if known) 21-30628 First Name Middle Name

\$152,990.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$152,990.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this infor	mation to identify your o	ase:				
De	btor 1	Aaron Hickmon					
		First Name	Middle Name	Last Name			
	btor 2 buse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN - EDMI			
Ca	se number	21-30628					
(if kı	nown)					☐ Check	if this is an
						amend	ded filing
Of	ficial For	m 106E/F					
		E/F: Creditors W	ho Have Unsecu	red Claims			12/15
any	executory cor	nd accurate as possible. Use	hat could result in a claim.	Also list executory conf	racts on Schedule A/B: F	roperty (Official Fo	rm 106A/B) and on
Sch	edule D: Credi	utory Contracts and Unexpi	red by Property. If more sp	ace is needed, copy the	Part you need, fill it out,	number the entries i	in the boxes on the
		ntinuation Page to this page nmber (if known).	e. If you have no informatio	n to report in a Part, do i	of the that Part. On the to	op or any additional	pages, write your
Pa	rt 1: List A	All of Your PRIORITY Un	secured Claims				
1.	Do any credit	tors have priority unsecured	I claims against you?				
	\square No. Go to	Part 2.					
	Yes.						
2.	identify what to possible, list the	ar priority unsecured claims ype of claim it is. If a claim ha- he claims in alphabetical orde e than one creditor holds a pai	s both priority and nonpriority r according to the creditor's n	amounts, list that claim he ame. If you have more that	ere and show both priority a	nd nonpriority amour	nts. As much as
	(For an explar	nation of each type of claim, s	ee the instructions for this for	m in the instruction bookle	t.) Total claim	Priority	Nonpriority
2.1	State c	of Michigan	Last 4 digits of	account number	\$600.00	amount \$600.00	amount
	•	reditor's Name)A// 4/				_
	POB 3	tion/Bankruptcy Unit 0158 Ig, MI 48909	When was the	debt incurred?			
		Street City State Zip Code	As of the date	you file, the claim is: Che	eck all that apply		
	Who incurre	ed the debt? Check one.	☐ Contingent				
	Debtor 1	only	☐ Unliquidated				
	Debtor 2	only	☐ Disputed				
	Debtor 1	and Debtor 2 only	•	ITY unsecured claim:			
		one of the debtors and anothe	Domestic su	pport obligations			
	_	this claim is for a commun	_	ertain other debts you owe	the government		
		subject to offset?	•	eath or personal injury whi	•		
	■ No		☐ Other. Speci		•		
	☐ Yes		— Other: open	taxes			-
Pai	rt 2: List A	All of Your NONPRIORIT	Y Unsecured Claims				
		tors have nonpriority unsec					
	_	ave nothing to report in this pa		urt with your other schedul	AS		
	Yes.	ave nothing to report in tills pe	ar. Submit this form to the Co	ari wilii your oliler sorieddi	oo.		
4.	unsecured cla	ur nonpriority unsecured cla im, list the creditor separately itor holds a particular claim, lis	for each claim. For each clai	m listed, identify what type	of claim it is. Do not list cla	ims already included	I in Part 1. If more

Total claim

Case number (if known) Debtor 1 Aaron Hickmon 21-30628 4.1 American Profit Recovery Last 4 digits of account number 4645 \$200.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 12/17** 34505 W 12 Mile Road #333 Farmington Hills, MI 48331 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Green Planet Lawn And ■ Other. Specify Tree Car ☐ Yes 4.2 **Capital One** \$168.00 Last 4 digits of account number 2369 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/14 Last Active Po Box 30285 When was the debt incurred? 04/21 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Convergent Outsourcing** Last 4 digits of account number \$314.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 9004 Renton, WA 98057 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Direct TV Collection

4.4	Credit Collection Services	Last 4 digits of account number	3058	\$97.00			
	Nonpriority Creditor's Name Attn: Bankruptcy						
	725 Canton St	When was the debt incurred?	Opened 10/20 Last Active 09/20				
	Norwood, MA 02062	mon was the dept mountain.	03/20				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts				
	Yes		Attorney Liberty Mutual In. Co.				
4.5	Credit Protection	Last 4 digits of account number		\$428.00			
	Nonpriority Creditor's Name 13355 Noel Rd. Dallas. TX 75240	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	■ Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Comcast C	able collection				
4.6	ELGA Credit Union	Last 4 digits of account number	0004	\$17.00			
	Nonpriority Creditor's Name	_					
	Attn: Bankruptcy		Opened 10/19 Last Active				
	2303 South Center Road Burton, MI 48519	When was the debt incurred?	3/27/21				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	•	,				
	■ Debtor 1 only	Debtor 1 only ☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other Specify Unsecured					

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

4.7	First Premier Bank	Last 4 digits of account number	8969	\$427.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 04/17 Last Active 08/17	
	Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.8	Flint Area Schl Ecu Nonpriority Creditor's Name	Last 4 digits of account number		\$1,343.00
	Attn: Special Services 4411 Calkins Rd	When was the debt incurred?		
	Flint, MI 48532 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Olleck all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection		
4.9	GMAC Nonpriority Creditor's Name	Last 4 digits of account number		\$7,884.00
	5400 Gateway Center Flint, MI 48507	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debte	
		·	•	
	☐ Yes	■ Other. Specify auto lease	deficiency	

Official Form 106 E/F

4.1	LJ Ross	Last 4 digits of account number	\$119.00
0	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	P.O. Box 2317	When was the debt incurred?	
	Ann Arbor, MI 48106	As of the date were file the plains in O	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify collection for Consumers Energy	
4.1	Merchant & Medical	Last 4 digits of account number	\$100.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ100.00
	6324 Taylor Drive Flint, MI 48507-4685	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify collection for Hurley	
4.1	Merchant & Medical	Last 4 digits of account number	\$89.00
	Nonpriority Creditor's Name 6324 Taylor Drive	When was the debt incurred?	
	Flint, MI 48507-4685 Number Street City State Zip Code	As of the date you file the claim is. Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	Пол	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection for Redbird Learing	

4.1 3	Merchant & Medical	Last 4 digits of account number	\$50.00				
<u> </u>	Nonpriority Creditor's Name		<u> </u>				
	6324 Taylor Drive	When was the debt incurred?	_				
	Flint, MI 48507-4685 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	7.6 of the date you me, the stand lot offeek all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	<u> </u>	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	•				
	Is the claim subject to offset?	report as priority claims	•				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify collection for Genesee Urgent Care					
4.1	Pocurgent Canital Services	Last 4 digits of account number 2654	\$693.00				
4	Resurgent Capital Services Nonpriority Creditor's Name	Last 4 digits of account number 2054	\$093.00				
	Attn: Bankruptcy	Opened 05/18 Last Active					
	Po Box 10497	When was the debt incurred? 10/17					
	Greenville, SC 29603						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	rs and another Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	t				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Factoring Company Account Credit One Bank N.A.	_				
4.1	Russell Collection Agency	Look A divide of account number	\$92.00				
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ32.00				
	G3285 Van Slyke Rd.	When was the debt incurred?					
	Flint, MI 48507						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	<u> </u>						
■ Debtor 1 only		☐ Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	t				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	Other. Specify collection for Convenient Family Dentistry					
		- Onler. Specify	<u> </u>				

Official Form 106 E/F

Steller Recovery	Last 4 digits of account number	\$429
Nonpriority Creditor's Name 1845 Highway 93 South , Ste. 310 Kalispell, MT 59901	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Comcast collection	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

-

				1	otal Claim
Tatal	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	600.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	600.00
					otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	0	•	0.00
	CI-	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	12,450.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	12,450.00

Fill in this infor	mation to identify your			
Debtor 1	Aaron Hickmon			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT OF MICHIGAN - EDMI		
	21-30628			
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	Ony		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	<u> </u>		<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	Oity		Otate	ZII COUE	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

					5/03/21 10.568
Fill in thi	is informa	ation to identify your	case:		
Debtor 1		Aaron Hickmon			
		First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, f		First Name	Middle Name	Last Name	
		cruptov Court for the	EASTERN DISTRICT O		
United S	lates barir	kruptcy Court for the:	EASTERN DISTRICT O	F WICHIGAN - EDIVII	
Case nur	mber 21	1-30628			
(if known)					☐ Check if this is an amended filing
					amended ming
Officia	al Fori	m 106H			
Sche	dule l	H: Your Cod	ebtors		12/15
people ar fill it out, your nam	re filing to and num ne and cas	ogether, both are equ ber the entries in the se number (if known)	ally responsible for supp boxes on the left. Attach h. Answer every question.	lying correct information the Additional Page to t	omplete and accurate as possible. If two married in the space is needed, copy the Additional Page, his page. On the top of any Additional Pages, write
1. DO	o you nav	e any codeptors? (If	you are filing a joint case, o	o not list eitner spouse as	a codeptor.
■ No	0				
☐ Ye	es				
			ı lived in a community pro , Nevada, New Mexico, Pu		(Community property states and territories include ton, and Wisconsin.)
■ N	o. Go to lir	2			
_			use, or legal equivalent live	with you at the time?	
		орошоо, толино оро	, 9 1	,	
	□ No				
	☐ No☐ Yes.				
	In	which community stat	e or territory did you live?		Fill in the name and current address of that person.
	City	у	State	Zip Code	
in lir Forn	ne 2 again	n as a codebtor only i Schedule E/F (Officia	f that person is a guarant	or or cosigner. Make sui	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to fil
		1: Your codebtor nber, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	ramo, ram	ibor, otroot, ony, otato and z			Check all schedules that apply.
3.1					☐ Schedule D, line
	Name				Schedule E/F, line
					☐ Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3.2	Name				☐ Schedule D, line
	INAIIIE				☐ Schedule E/F, line
					☐ Schedule G, line
	Number City	Street	State	ZIP Code	
	Oity		5.010	2n 30de	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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Fill in this information	on to identify your case:	
Debtor 1	Aaron Hickmon	_
Debtor 2 (Spouse, if filing)		_
United States Bank	cruptcy Court for the: EASTERN DISTRICT OF MICHIGAN - EDMI	_
Case number	21-30628	Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 1061</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/1

5

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed	☐ Employed ☐ Not employed
	employers.	Occupation	Production Operator	
	Include part-time, seasonal, or self-employed work.	Employer's name	General Motors LLC	
	Occupation may include student or homemaker, if it applies.	Employer's address	300 Renaisance Drive Detroit, MI 48243	
		How long employed th	nere? 21 yrs	
Par	Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay. 3.

Calculate gross Income. Add line 2 + line 3.

			non-tilli	ng spouse
2.	\$	6,500.00	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	6,500.00	\$	N/A

For Debtor 2 or

For Debtor 1

Deb	tor 1	Aaron Hickmon		C	Case nu	mber (if kr	own)	21-3062	28	
	Сор	y line 4 here	4.		For Do	ebtor 1 6,500	0.00		otor 2 or ng spouse N/A	
5.	List	all payroll deductions:				•				_
	5a. 5b. 5c. 5d.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans	5a. 5b. 5c. 5d.		\$ \$ 	190	5.00 0.00 0.00	\$ \$ 	N/A N/A N/A	<u>\</u>
	5e. 5f. 5g. 5h.	Insurance Domestic support obligations Union dues Other deductions. Specify:	5e. 5f. 5g. 5h.		\$ \$ \$ \$	329 0	0.00	\$ \$ \$ + \$	N/A N/A N/A	<u>\</u> \ \
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,255		\$	N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,245	5.00	\$	N/A	<u> </u>
9.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Bonus pro rata IRS refunds minimal to owe	8a. 8b. 8c. 8d. 8e. 8f. 8g. 8h.	· · · · · · · · · · · · · · · · · · ·	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0 0 0 0 0 420 25	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	4,8	890.00	+ \$_	ı	1/A = \$	4,890.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe						edule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies						, if it	12. \$ Comb	4,890.00
13.	Do y ■ □	you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	?						month	lly income

Eill	in this informa	tion to identify yo	onicase.			Ī		
						Ohaa	Late of the transfer	
Deb	tor 1	Aaron Hickm	non				k if this is: An amended filing	
1	tor 2						A supplement show	ving postpetition chapter
(Spo	ouse, if filing)					,	13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MIC	HIGAN - EDMI	1	MM / DD / YYYY	
		-30628						
(If k	nown)							
O	fficial Fo	rm 106J						
		J: Your	Exner	ISAS				12/15
Be info	as complete a	and accurate as	possible eded, atta	If two married people ch another sheet to the	e are filing together, b his form. On the top o			r supplying correct
Par 1.	t 1: Descr Is this a join	ibe Your House	hold					
١.	No. Go to							
	_		in a separ	ate household?				
	□ N	0	•					
	☐ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Exper</i>	ses for Separate Hous	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			daughter		12	Yes
					son-student		21	□ No ■
					Son-Student			■ Yes □ No
								☐ Yes
								□ No
_	_							☐ Yes
3.	expenses of	enses include f people other t d your depende	han 👝	No Yes				
Par	t 2: Estim	ate Your Ongoi	ng Month	y Expenses				
exp								pter 13 case to report f the form and fill in the
Inc	lude expense	s paid for with	non-cash	government assistan	ce if you know			
	value of such ficial Form 10		d have inc	luded it on Schedule	I: Your Income		Your expe	enses
(0)		01.)						
4.		r home owners d any rent for th			e. Include first mortgag	ge 4. \$		0.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				ipkeep expenses		4c. \$		89.00
5.		owner's associat		dominium dues our residence, such as	s home equity loans	4d. \$ 5. \$		0.00
J.	Additional	nortgage payint	cinco ioi ye	ai residence, such as	Tionic equity loans	υ. φ		0.00

Official Form 106J Schedule J: Your Expenses 21-30628-jda Doc 11 Filed 05/03/21 Entered 05/03/21 11:02:47 Page 24 of 26

Debt	tor 1	Aaron Hickmon	Case number (if known)	21-30628
6.	Utilit	ties:		
	6a.	Electricity, heat, natural gas	6a. \$	300.00
	6b.	Water, sewer, garbage collection	6b. \$	100.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	450.00
	6d.	Other. Specify:	6d. \$	0.00
7.	Food	d and housekeeping supplies	7. \$	900.00
		dcare and children's education costs	8. \$	95.00
		hing, laundry, and dry cleaning	9. \$	120.00
		sonal care products and services	10. \$	210.00
		ical and dental expenses	11. \$	95.00
		sportation. Include gas, maintenance, bus or train fare.	·	
		not include car payments.	12. \$	320.00
13.	Ente	ertainment, clubs, recreation, newspapers, magazines, and boo	oks 13. \$	100.00
14.	Char	ritable contributions and religious donations	14. \$	100.00
15.	Insu	rance.		
	Do no	not include insurance deducted from your pay or included in lines 4 of	or 20.	
	15a.	Life insurance	15a. \$	16.00
	15b.	Health insurance	15b. \$	0.00
	15c.	Vehicle insurance	15c. \$	245.00
	15d.	Other insurance. Specify:	15d. \$	0.00
16.	Taxe	es. Do not include taxes deducted from your pay or included in lines	4 or 20.	
	Spec	cify:	16. \$	0.00
17.		allment or lease payments:		
		Car payments for Vehicle 1	17a. \$	0.00
		Car payments for Vehicle 2	17b. \$	0.00
		Other. Specify:	17c. \$	0.00
	17d.	Other. Specify:	17d. \$	0.00
18.		r payments of alimony, maintenance, and support that you did		0.00
		ucted from your pay on line 5, Schedule I, Your Income (Officia		
19.		er payments you make to support others who do not live with y		0.00
	Spec		19.	
20.		er real property expenses not included in lines 4 or 5 of this for		0.00
		Mortgages on other property	20a. \$	0.00
		Real estate taxes	20b. \$	0.00
		Property, homeowner's, or renter's insurance	20c. \$	0.00
		Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e.	Homeowner's association or condominium dues	20e. \$	0.00
21.	Othe	er: Specify: Gifts, Vacation, & Emergencies	21+\$	50.00
22	Calc	culate your monthly expenses		
		Add lines 4 through 21.	\$	3,190.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official I		3,130.00
			φ	2.400.00
	22C.	Add line 22a and 22b. The result is your monthly expenses.	*	3,190.00
23.	Calc	culate your monthly net income.		,
		Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,890.00
		Copy your monthly expenses from line 22c above.	23b\$	3,190.00
			·	
	23c.	Subtract your monthly expenses from your monthly income.		4 ==== ==
	-	The result is your monthly net income.	23c. \$	1,700.00
	_			
24.		you expect an increase or decrease in your expenses within the		
		example, do you expect to finish paying for your car loan within the year or do fication to the terms of your mortgage?	you expect your mortgage payment to incr	ease or decrease because of a
	_	, , ,		
	■ No			
	☐ Ye	es. Explain here:		

Fill in this inform				
Debtor 1	Aaron Hickmon			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN - EDMI	
Case number	21-30628			
(if known)	21 00020			☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	No							
	Yes. Name of person	Attach Bankruptcy Petition Declaration, and Signature						
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Aaron Hickmon X							
	Aaron Hickmon Signature of Debtor 1	Signature of Debtor 2						
	Date May 3, 2021	Date						

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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